

Recipient Committee Campaign Statement Cover Page

COVER PAGE

SEE INSTRUCTIONS ON REVERSE

Statement covers period
from July 1, 2016
through December 31, 2016

Date of election if applicable:
(Month, Day, Year)

FILED
CITY OF CORONA
CITY CLERK
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For Official Use Only

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.

- ☒ Officeholder, Candidate Controlled Committee
☐ State Candidate Election Committee
☐ Recall
(Also Complete Part 5)
- ☐ General Purpose Committee
☐ Sponsored
☐ Small Contributor Committee
☐ Political Party/Central Committee
- ☐ Primarily Formed Ballot Measure Committee
☐ Controlled
☐ Sponsored
(Also Complete Part 6)
- ☐ Primarily Formed Candidate/Officeholder Committee
(Also Complete Part 7)

2. Type of Statement:

- ☐ Preelection Statement
☒ Semi-annual Statement
☐ Termination Statement
(Also file a Form 410 Termination)
- ☐ Quarterly Statement
☐ Special Odd-Year Report
- ☐ Amendment (Explain below)

3. Committee Information

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

I.D. NUMBER
1245246

Treasurer(s)

NAME OF TREASURER

MAILING ADDRESS

CITY

STATE

ZIP CODE

AREA CODE/PHONE

STREET ADDRESS (NO P.O. BOX)
1800 South Main Street

CITY

STATE

ZIP CODE

AREA CODE/PHONE

Corona

CA

9282

951-833-8136

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

P.O. Box 1837

CITY

STATE

ZIP CODE

AREA CODE/PHONE

Corona

CA

92878

951-833-8136

OPTIONAL: FAX / E-MAIL ADDRESS

spiegel18@aol.com

OPTIONAL: FAX / E-MAIL ADDRESS

CITY

STATE

ZIP CODE

AREA CODE/PHONE

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on January 30, 2017
Date

By

Karen S. Spiegel
Signature of Treasurer/Assistant Treasurer

Executed on January 30, 2017
Date

By

Karen S. Spiegel
Signature of Controlling Officer/Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on _____
Date

By

Signature of Controlling Officer/Candidate, State Measure Proponent

Executed on _____
Date

By

Signature of Controlling Officer/Candidate, State Measure Proponent

Recipient Committee Campaign Statement Cover Page — Part 2

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
Karen Spiegel

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
Corona City Council

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
1800 South Main Street Corona CA 92882

Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.

COMMITTEE NAME	I.D. NUMBER
Karen Spiegel for Supervisor 2018	1384828
NAME OF TREASURER	CONTROLLED COMMITTEE?
Richard Teaman	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)	
4201 Brockton Avenue	
CITY STATE ZIP CODE AREA CODE/PHONE	
Riverside CA 92501 941/274-9500	
COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE?
	<input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)	
CITY STATE ZIP CODE AREA CODE/PHONE	

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
Identify the controlling officeholder, candidate, or state measure proponent, if any.		
NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT		
OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY	

7. Primarily Formed Candidate/Officeholder Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

Amounts may be rounded
to whole dollars.

SUMMARY PAGE

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Karen Spiegel for Corona City Council

Statement covers period
from January 1, 2016
through June 30, 2016

CALIFORNIA
FORM 460

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I.D. NUMBER
1245246

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions.....	Schedule A, Line 3 0	0
2. Loans Received.....	Schedule B, Line 3 0	0
3. SUBTOTAL CASH CONTRIBUTIONS.....	Add Lines 1 + 2 0	0
4. Nonmonetary Contributions.....	Schedule C, Line 3 0	0
5. TOTAL CONTRIBUTIONS RECEIVED.....	Add Lines 3 + 4 0	0

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

20. Contributions Received	1/1 through 6/30	7/1 to Date
21. Expenditures Made	\$	\$

Expenditures Made

6. Payments Made.....	Schedule E, Line 4 6,305.27	6,305.27
7. Loans Made.....	Schedule H, Line 3 0	0
8. SUBTOTAL CASH PAYMENTS.....	Add Lines 6 + 7 6,305.27	6,305.27
9. Accrued Expenses (Unpaid Bills).....	Schedule F, Line 3 0	0
10. Nonmonetary Adjustment.....	Schedule G, Line 3 0	0
11. TOTAL EXPENDITURES MADE.....	Add Lines 8 + 9 + 10 6,305.27	6,305.27

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made*
(If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy) Total to Date

1/1/16 \$

6/30/16 \$

Current Cash Statement

12. Beginning Cash Balance.....	Previous Summary Page, Line 15 20,364.20
13. Cash Receipts.....	Column A, Line 3 above 0
14. Miscellaneous Increases to Cash.....	Schedule I, Line 4 6,305.27
15. Cash Payments.....	Column A, Line 8 above 14,048.93
16. ENDING CASH BALANCE.....	Add Lines 12 + 13 + 14, then subtract Line 15 14,048.93

If this is a termination statement, Line 16 must be zero.

Cash Equivalents and Outstanding Debts

17. LOAN GUARANTEES RECEIVED.....	Schedule B, Part 2 0
18. Cash Equivalents.....	See instructions on reverse 0
19. Outstanding Debts.....	Add Line 2 + Line 9 in Column B above 0

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 8 (if any).

*Amounts in this section may be different from amounts reported in Column B.

Schedule E Payments Made

Amounts may be rounded
to whole dollars.

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Karen Spiegel for Corona City Council

Statement covers period
from January 1, 2016
through June 30, 2016

SCHEDULE E
CALIFORNIA
FORM 460

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I.D. NUMBER
1245246

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MIBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Greater Hispanic Chamber of Commerce 119 E 4th St. Corona, CA 92879	MTG			150.00
Secretary of State Sacramento, CA	CVC		Donation	50.00
Fire & Burn Foundation/CFA 815 W Sixth Street Corona, CA 92882	CVC		Donation	236.00
SUBTOTAL \$				436.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Schedule E Summary

- Itemized payments made this period. (Include all Schedule E subtotals.) \$ 6,215.83
- Unitemized payments made this period of under \$100. \$ 89.44
- Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) \$ 0
- Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) **TOTAL \$ 6,305.27**

Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Karen Spiegel for Corona City Council

Statement covers period from <u>January 1, 2016</u> through <u>June 30, 2016</u>		Page <u>5</u> of <u>10</u>	
ID. NUMBER <u>1245246</u>		460	

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE ALSO ENTER ID. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
The Michael Williams Company 3711-A Arlington Avenue Riverside, CA 92506	FND		Fundraising Commission	1,398.17
Office Depot 1160 El Camino Ave Corona, CA 92879	OFC		Office Supplies/Copies	74.08
Woman's Improvement Club 1101 S Main St. Corona, CA 92882	CVC		Donation, Member Dues	162.00
RCCD Foundation 4800 Magnolia Ave. Riverside, CA 92506	CVC		Donation	160.00
Meals on Wheels 4845 Brockton Ave. Riverside, CA 92506	CVC		Donation	160.00
SUBTOTAL \$				1,954.25

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

SEE INSTRUCTIONS ON REVERSE
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Karen Spiegel for Corona City Council

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CMF campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOI voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
United States Postal Service 414 W Grand Blvd, Corona, CA 92878	FND	Postage		31.95
Corona Public Library Foundation 650 S Main Street Corona, CA 92882	CVC	Donation		400.00
99 Cent Store 725 S Main Street Corona, CA 92879	CVC	Corona Senior Center - Lunch & Learn		45.44
Costco 480 N McKinley St. Corona, CA 92879	CVC	Office Supplies, Computer, Printer, Ink		678.98
Kiwanis Club of Corona P.O. Box 7490 Norco, CA 92860	CVC	Donation		50.00
SUBTOTAL \$				1,206.37

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Schedule E (Continuation Sheet) Payments Made

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SEE INSTRUCTIONS ON REVERSE
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Karen Spiegel for Corona City Council

SCHEDULE E (CONT.)

Statement covers period
from January 1, 2016
through June 30, 2016

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CALIFORNIA
FPPC FORM 460

I.D. NUMBER
1245246

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- | | | | | | |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc. | MBR | member communications | RAD | radio airtime and production costs |
| CNS | campaign consultants | MTG | meetings and appearances | RFD | returned contributions |
| CTB | contribution (explain nonmonetary)* | OFC | office expenses | SAL | campaign workers' salaries |
| CVC | civic donations | PET | petition circulating | TEL | t.v. or cable airtime and production costs |
| FLC | candidate filing/ballot fees | PHO | phone banks | TRC | candidate travel, lodging, and meals |
| FND | fundraising events | POL | polling and survey research | TRS | staff/spouse travel, lodging, and meals |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense | PRO | professional services (legal, accounting) | VOT | voter registration |
| LIT | campaign literature and mailings | PRT | print ads | WEB | information technology costs (internet, e-mail) |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Registrar of Voters 2724 Gateway Dr. Riverside, CA 92507	LIT	Copies		37.80
AYHD Foundation Corona, CA	CVC	Donation		100.00
Eastvale Community Foundation 12363 Limonte Avenue, Suite 910 Eastvale, CA 91752	CVC	Donation		100.00
Day of the Child P.O. Box 281 Corona, CA 92878	CVC	Donation		250.00
Corona Fire Safety Foundation 735 Public Safety Way Corona, CA 92880	CVC	Donations		310.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 797.80

Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

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CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FLC candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
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LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Norco Area Chamber of Commerce 3954 Old Hammer Ave Norco, CA 92860	MTG	Meeting		70.00
United States Postmaster 420 E Grand Blvd. Corona, CA 92878	OFC	Post Office Box		134.00
Dollar Storage 205 N Lincoln Corona, CA 92882	OFC	Storage		643.10
Kids Rock Free 815 W Sixth Street Corona, CA 92882	CVC	Donation		100.00
Circle City Kiwanis P.O. Box 78146 Corona, CA 92877	CVC	Donations		100.00

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SUBTOTAL \$ 1,047.10

**Schedule E
(Continuation Sheet)
Payments Made**

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SCHEDULE E (CONT.)

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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Soroptimist International of Corona P.O. Box 381 Corona, CA 92828	CVC		Donation, Dues	192.50
American Cancer Society 6355 Riverside Ave. Riverside, CA	CVC		Donation	230.00
American Diabetes Association 2060 Chicago Ave Riverside, CA 92507	CVC		Donation	50.00
Corona Rotary Corona, CA	CVC		Donation	120.00
Vons 369 Magnolia Ave Corona, CA 92879	CVC		Food Donation - 100 Women Who Care	107.28
SUBTOTAL \$				699.78

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MAP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
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[illegible]

* Payments that are contributions or independent expenditures must also be summarized on Schedule D

SUBTOTAL \$ 74.53